Date September 4, 2007

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FEE TRANSMITTAL				Application Number 09/53		/539,096	39,096	
		\L [Filing Date	Ma	arch 30, 2000			
For FY 2006				First Named Inv	ventor Jo	seph Fitzpatrick		
П		0 07 050 4 6		Examiner Name	e Je	ffrey Gerben Ho	ekstra	
Applicant claims sma	II entity status	. See 37 CFR 1.2	21	Art Unit	37	36		
TOTAL AMOUNT OF PA	YMENT (\$)	900.00	- 1	Attomey Docke	t No. D2	025/20064		
METHOD OF PAYMEN	IT (abook oil	that apply)						
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Check Credit	Card L	Money Order	Non	e LlOther (please identit	īy):		
✓ Deposit Account	Deposit Account	Number: 03-007	5 .	Deposit A	ccount Name	Caesar Rivise	et al.	
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✓ Charge fee(s	s) indicated be	low		Char	o foo(s) ind	icated balance	ept for the filing fee	
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FEE CALCULATION (All the fees	below are due	upon fil	ing or may be	subject to	a surcharge.)		
. BASIC FILING, SEA								
	FÍLING F	EES		CH FEES	EXAMIN	ATION FEES		
Application Type	Fee (\$)	mall Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)	
Utility	300	150	500	250	200	100	0	
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80	0	
Reissue	300	150	500	250	600	300	0	
Provisional	200	100	0	0	000	0	0	
2. EXCESS CLAIM FE		100	U	U	U	-	Small Entity	
Fee Description						Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues)						50	25	
Each independent claim over 3 (including Reissues) Multiple dependent claims						200	100	
Multiple dependent	claims Extra Clain	ns Fee (\$)	Eco	Paid (\$)		360	180 endent Claims	
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3. APPLICATION SIZE	FEE							
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. OTHER FEE(S)							Fees Paid (\$)	
Non-English Specif	-						0	
Other (e.g., late filin	ig surcharge	Second and Thi	rd Month	Extension of Tim	ne (Large Ei	ntity)	\$900.00	
UBMITTED BY								
gnature Miss	1/1.	-	- [Registration No.	0 395	Telephone	215-567-2010	
				Attornew/Agent) 6				

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the Institutes control renormation is required by 3 CHY 1, 156, the individual is required to obtain or retainst a benefit for production. So the light of by 10 CHY 1, 156, the individual is required to obtain or retainst a benefit for production is estimated to take 30 minutes to complete, including againsting, preparing, and submilling the completed application. Certification is estimated to take 30 minutes to complete, including against single preparing, and submilling the completed application from the to SGY 3 CHY 1.1. This collection is estimated to take 30 minutes to complete, and complete against single production from the to SGY 10 CHY 1.1 fixed will any depending upon the individual collect. Any comments on the amount of their you required to complete the storm and visualization will be sent to the Child information Clinica. Any comments on the amount of their your sent expectation will be sent to the Child information Clinica. U.S. Department of commence, P.O. Box 1450, Alexandria, VX 2235-1450, D.O. NOT SEXD FEES OR COMPLETED FORMIS TO THIS ADDRESS. SEXD TO TC commissioner for Patentia, P.O. Box 1450, Alexandria, VX 2235-1450, D.O. NOT SEXD FEES OR COMPLETED FORMIS TO THIS ADDRESS. SEXD TO TC commissioner for Patentia, P.O. Box 1450, Alexandria, VX 2235-1450, D.O. NOT SEXD FEES OR COMPLETED FORMIS TO THIS ADDRESS. SEXD TO TC commissioner for Patentia, P.O. Box 1450, Alexandria, VX 2235-1450.

(Attorney/Agent)

Signature

Name (Print/Type) Michael J. Cornelison